Fill in this information to identify you		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 ✓ Chapter 13	☐ Check if this amended filin

#### Official Form 101

#### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

F	art 1: Identify Yourself		
	-	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or	Alberto First Name	First Name
	passport).	Middle Name	Middle Name
	parespectly.	Rios	
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or maiden names.	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>2</u> <u>8</u> <u>7</u> <u>5</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx
4.	Any business names and Employer Identification Numbers	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	(EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and	Business name	Business name
	doing business as names	Business name	Business name

Debt	tor 1 Case 16-00300	Page 2 of	01/06/16 15:35:45 Desc Main		
	First Name	Middle Name Dogs Markent Page 2 of About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
		EIN	EIN		
		EIN	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		1723 N Whipple St			
		Number Street	Number Street		
		Chicago IL 60647			
		City State ZIP Code  Cook	City State ZIP Code		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.		
		1723 N Whipple St			
		Number Street	Number Street		
		P.O. Box	P.O. Box		
		Chicago IL 60647			
		City State ZIP Code	City State ZIP Code		
	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)		
Pa	Tell the Court	About Your Bankruptcy Case			
	The chapter of the Bankruptcy Code you	Check one: (For a brief description of each, see No for Bankruptcy (Form 2010)). Also, go to the top of	otice Required by 11 U.S.C. § 342(b) for Individuals Filin page 1 and check the appropriate box.		
	are choosing to file under	☐ Chapter 7			
		☐ Chapter 11			
		Charter 40			
		☐ Chapter 11 ☐ Chapter 12 ☑ Chapter 13			

Deb	tor 1 Case 16-00300		Filed 01/06/16  Document	Entered 01/06	6/16 15:35:45 Imber (if known) _	5 Desc Main
	First Name	Middle Name	D Cast Name III	rage 3 01 37		
8.	How you will pay the fee	court pay v	t for more details about he	ow you may pay. Typica x, or money order. If you	ally, if you are payi ur attorney is subm	clerk's office in your local ng the fee yourself, you may iitting your payment on your ed address.
			ed to pay the fee in insta			nd attach the Application for
		By la than fee ii	aw, a judge may, but is no 150% of the official pove	t required to, waive you rty line that applies to you pose this option, you mu	r fee, and may do sour family size and ust fill out the Appli	ou are filing for Chapter 7. so only if your income is less you are unable to pay the cation to Have the Chapter 7
9.	Have you filed for bankruptcy within the	<b>☑</b> No				
	last 8 years?	Yes.				
		District _		Whe	n	Case number
						_
		District _		Whe	n MM / DD / YYYY	Case number
		District _				Case number
10.	Are any bankruptcy cases pending or being	<b>☑</b> No				
	filed by a spouse who is	Yes.				
	not filing this case with you, or by a business	Debtor _			Relationshi	o to you
	partner, or by an	District		Whe	n	Case number,
	affiliate?	_			MM / DD / YYYY	if known
		Debtor _			Relationshi	p to you
		District		Whe	n	Case number,
		_			MM / DD / YYYY	if known
11.	Do you rent your residence?	✓ No. ☐ Yes.	Go to line 12. Has your landlord obtai residence?	ned an eviction judgme	nt against you and	do you want to stay in your
			<ul><li>No. Go to line 12.</li><li>Yes. Fill out Initial</li></ul>		viction Judgment A	gainst You (Form 101A)

and file it with this bankruptcy petition.

Deb		iddle N			iled 01/06/16 <del>Dogwyge</del> nt s You Own as a	Entered 01/00 Page 4 of 57 <sup>nt</sup> Sole Proprietor	5/16 15:35:45 umber (if known)	Desc Main
12.	Are you a sole proprietor of any full- or part-time business?	<b>☑</b>			Part 4. ne and location of bu	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			_	ne of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			City Ch	eck the appropriate in Health Care Busin Single Asset Real Stockbroker (as de	box to describe your buess (as defined in 11 L Estate (as defined in 1 efined in 11 U.S.C. § 10 r (as defined in 11 U.S.	J.S.C. § 101(27A)) 1 U.S.C. § 101(51B)) 01(53A))	ZIP Code
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	can	set ap	prop nt ba	riate deadlines. If yolance sheet, stateme	ou indicate that you are	e a small business deb flow statement, and fe	business debtor so that it tor, you must attach your deral income tax return 16(1)(B).
	For a definition of small		No.	l aı	n not filing under Ch n filing under Chapte Bankruptcy Code.	•	mall business debtor a	according to the definition in
	business debtor, see 11 U.S.C. § 101(51D).		Yes.	l aı		er 11 and I am a small I	business debtor accord	ding to the definition in the
Pa	Report If You Ow	n o	r Hav	e A	ny Hazardous P	roperty or Any Pr	operty That Need	s Immediate Attention
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or			Wł	nat is the hazard?			
	safety? Or do you own any property that needs immediate attention?			lf ii	mmediate attention is	s needed, why is it need	ded?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Wł	nere is the property?	Number Street		

City

State

ZIP Code

Debtor 1 Case 16-00300 Doc 1 Filed 01/06/16 Entered 01/06/16 15:35:45 Desc Main Page 5 of 357 number (if known)

#### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:** 

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□lan	n not require	ed to receive	a briefing a	about
		ng because o		

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

ı	l am	not	requi	ired	to	rece	ive	а	bri	efi	ng	al	oout
			unse										

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Page 6 of 57 number (if known) — Doc 1 Filed,01/06/16 Desc Main Debtor 1 Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do you 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) have? as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.  $\square$ Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. State the type of debts you owe that are not consumer or business debts. 16c. 17. Are you filing under Chapter 7? I am not filing under Chapter 7. Go to line 18. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after Yes. administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is excluded and administrative expenses are paid that funds will be Yes available for distribution to unsecured creditors?

# 20. How much do you estimate your liabilities to

19. How much do you

be worth?

18. How many creditors do

you estimate that you

estimate your assets to

1-49

50-99

 $\overline{\mathbf{Q}}$ 

 $\square$ 

100-199

200-999

\$0-\$50,000

\$0-\$50,000

\$50,001-\$100,000

\$100,001-\$500,000

\$500,001-\$1 million

\$50,001-\$100,000

\$100,001-\$500,000

\$500,001-\$1 million

Part 7:

be?

owe?

Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

1,000-5,000

5,001-10,000

П

П

10,001-25,000

\$1,000,001-\$10 million

\$10,000,001-\$50 million

\$50,000,001-\$100 million

\$100,000,001-\$500 million

\$1,000,001-\$10 million

\$10,000,001-\$50 million

\$50,000,001-\$100 million

\$100,000,001-\$500 million

25,001-50,000

50,001-100,000

П

П

П

More than 100,000

\$500,000,001-\$1 billion

More than \$50 billion

More than \$50 billion

\$500,000,001-\$1 billion

\$1,000,000,001-\$10 billion

\$10,000,000,001-\$50 billion

\$1,000,000,001-\$10 billion

\$10,000,000,001-\$50 billion

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Alberto Rios	X
Signature of Debtor 1	Signature of Debtor 2
Executed on <b>01/06/2016</b>	Executed on
MM / DD / YYYY	MM / DD / YYYY

Case 16-00300 Doc 1 Filed 01/06/16 Entered 01/06/16 15:35:45 Desc Main Plant Page 7 of 357 number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Robert J. Adams & Associates		Date	01/06/2016
Signature of Attorney for Debtor			MM / DD / YYYY
Robert J. Adams & Associates			
Printed name			
Robert J Adams & Associates			
Firm Name			
901 W Jackson Suite 202			
Number Street			
Chicago	IL		60607
City	State		ZIP Code
Contact phone (312) 346-0100	_ Email address _		
0013056			
Bar number	State		

			Dο	<u>cument</u> Page	<u>8 of</u> 57	
F	ill in this inf	ormation to	identify your case	and this filing:		
De	ebtor 1	Alberto		Rios		
		First Name	Middle Name	Last Name		
	ebtor 2 spouse, if filing)	First Name	Middle Name	Last Name	—	
Uı	nited States Ba	nkruptcy Court fo	or the: <b>NORTHERN D</b>	ISTRICT OF ILLINOIS	<u>;                                    </u>	
	ase number				☐ Check	if this is an
(if	known)					ded filing
	ficial Form					
Sc	hedule A	B: Propert	:y			12/15
the filin she	asset in the ca ig together, bo let to this form	ategory where y th are equally r . On the top of	ou think it fits best. B esponsible for supplyi any additional pages,	e as complete and accu ng correct information. write your name and ca	If an asset fits in more than one caurate as possible. If two married per If more space is needed, attach ause number (if known). Answer ever Real Estate You Own or Have	eople are separate ery question.
1.	Do you own	or have any leg	al or equitable interest	in any residence, build	ling, land, or similar property?	
••	No. Go t		ar or equitable interest	in any residence, bund	ing, land, or similar property:	
		ere is the prope	rty?			
2.		-	•	of your entries from Pa ite that number here	rt 1, including any	\$0.00
P	art 2: De:	scribe Your \	/ehicles			
	-	_	-	=	they are registered or not? Include fulle G: Executory Contracts and Unex	
•	0					
3.		rucks, tractors,	sport utility vehicles, i	notorcycles		
	☑ No □ Yes					
4.	•	•	•	•	other vehicles, and accessories	
		oats, trailers, mo	tors, personal watercraf	t, fishing vessels, snowm	nobiles, motorcycle accessories	
	✓ No ☐ Yes					
5.	Add the dolla	r value of the p	ortion you own for all	of your entries from Pa	rt 2, including any	42.00
	entries for pa	iges you have a	ttached for Part 2. Wr	ite that number here	······	\$0.00
Р	art 3: Des	scribe Your I	Personal and Hous	sehold Items		
Do	you own or ha	ve any legal or	equitable interest in a	ny of the following item	s?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	_	oods and furnis	-	l Stale a second		
	Examples: Ma	ajor appliances,	furniture, linens, china,	kitchenware		
	ш	cribe 5 rooi	n apartment			\$200.00

Official Form 106A/B Schedule A/B: Property page 1

Deb		Case 16-003  Alberto First Name		Doc 1	Filed 01/06/16  Downsment  Last Name	Entered 01/06/16 15:35:45 Page 9 0657number (if known)	
7	Electr		IV	nddie Name	Last Name		
7.	Electro Examp	oles: Televisions			-	equipment; computers, printers, scanners; es, cameras, media players, games	
	✓ No	es. Describe					
8.			-		•	x; books, pictures, or other art objects; ns, memorabilia, collectibles	
	✓ No	es. Describe					
9.			ographi	c, exercise, a	and other hobby equipmols; musical instruments	ent; bicycles, pool tables, golf clubs, skis;	
	☑ No	es. Describe					
10.	Examp	oles: Pistols, rifles	s, shotg	uns, ammun	ition, and related equipn	nent	
		es. Describe					
11.		oles: Everyday clo	othes, fu	urs, leather c	oats, designer wear, sho	pes, accessories	
	☐ No	es. Describe (	Clothe	s			\$500.00
12.	Jewel Examp	•	welry, co	ostume jewel	Iry, engagement rings, w	vedding rings, heirloom jewelry, watches, gems	,
	✓ No	es. Describe					
13.	Examp	arm animals oles: Dogs, cats, l	birds, h	orses			
	✓ No	es. Describe					
14.	Any of	•	d house	ehold items	you did not already lis	t, including any health aids you	
		es. Give specific					
15.	Add th					any entries for pages you have	\$700.00
	attach	eu for Part 3. Wi	iite tne	number ner	e	→	<del></del>
Pa	art 4:	Describe Y	our F	inancial A	ssets		
Doy	ou ow	n or have any leç	gal or e	quitable inte	erest in any of the follo	wing?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
16.	Cash Examp	oles: Money you h	nave in	your wallet, i	n your home, in a safe d	leposit box, and on hand when you file your	
	□ No					Oh-	<b>\$60.00</b>
	ıvı Ye	:5				Cash:	\$60.00

Dah	tor 1 Alberto	Dormanent	Page 10 @fase7humber (if known)	Desc Main
Deb	First Name	Middle Name Last Name	<u>rage to wase</u> number (ii known)	
17.				
	✓ No  Yes	Institution name:		
18.	Bonds, mutual funds, or p Examples: Bond funds, inv	publicly traded stocks vestment accounts with brokerage firms,	money market accounts	
	✓ No ☐ Yes	Institution or issuer name:		
19.		k and interests in incorporated and un rtnership, and joint venture	incorporated businesses, including	-
	✓ No  Yes. Give specific information about them	Name of entity:	% of ownership:	
20.	Negotiable instruments inc	ate bonds and other negotiable and no clude personal checks, cashiers' checks, its are those you cannot transfer to some	promissory notes, and money orders.	
	✓ No  Yes. Give specific information about them	Issuer name:		_
21.	Retirement or pension ac Examples: Interests in IRA profit-sharing p	A, ERISA, Keogh, 401(k), 403(b), thrift sa	avings accounts, or other pension or	
	✓ No  Yes. List each account separately.	Type of account: Institution name:		
22.		leposits you have made so that you may	continue service or use from a company (electric, gas, water), telecommunications	
	✓ No  Yes	Institution name or i		
23.	<b>☑</b> No	a specific periodic payment of money to  Issuer name and description:	you, either for life or for a number of years)	
	_	·		
				_
				_

	Case 16-0030	O DOCI	Filed 01/00/1			Desc Main
Debt	tor 1 Alberto First Name	Middle Name	Dokidinent  Last Name	Page II Offa Soci	humber (if known)	
24.	Interests in an education	IRA, in an acco	ount in a qualified AB	LE program, or under a	qualified state tuition pro	ogram.
	26 U.S.C. §§ 530(b)(1), 529	3A(b), and 529(b	D)(1).			
	✓ No ☐ Yes	Institution nam	ne and description. Se	parately file the records of	of any interests. 11 U.S.C.	. § 521(c)
25.	Trusts, equitable or future powers exercisable for yo	-	roperty (other than ar	nything listed in line 1),	and rights or	
	<b>☑</b> No					
	Yes. Give specific information about them	I				
26.	Patents, copyrights, trade Examples: Internet domain				ments	
	No No					
	Yes. Give specific information about them	ı				
27.	Licenses, franchises, and Examples: Building permits	-	-	ociation holdings, liquor li	icenses, professional licen	nses
	<b>⋈</b> No	,	, ,	3-, 1		
	Yes. Give specific information about them					
Mon	ey or property owed to yo					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you					
	N					
	✓ No  Yes. Give specific info	rmation			Federa	l: <b>\$0.00</b>
	about them, including w				State:	\$0.00
	you already filed the ref					
	•				Local:	\$0.00
29.	Family support  Examples: Past due or lum	ıp sum alimony,	, spousal support, child	support, maintenance, c	divorce settlement, propert	y settlement
	✓ No ☐ Yes. Give specific info	rmation			Alimony:	\$0.00
	Tes. Give specific fine	madon			·	
					Maintenance:	\$0.00
					Support:	\$0.00
					Divorce settlement	<b>\$0.00</b>
					Property settlemen	t: <b>\$0.00</b>
30.	Other amounts someone	-				
	Examples: Unpaid wages, compensation,			ty benefits, sick pay, vac you made to someone e		
	<b>☑</b> No					
	☐ Yes Give specific info	rmation				

Deb	otor 1	Case 16-00300	Doc 1	Filed 01/06/16 Dormanent	Entered 01/06/16 15:35:45 Page 12 @fa57humber (if known)	Desc Main
		First Name N	liddle Name	Last Name		
31.	Exar			ce; health savings accou	int (HSA); credit, homeowner's, or renter's inst	urance
	<b>–</b> (	Yes. Name the insurance company of each policy and list its value	Company	name:	Beneficiary:	Surrender or refund value:
					<del></del>	_
32.	If you	interest in property that i u are the beneficiary of a lived to receive property because	ving trust, ex	pect proceeds from a life	died e insurance policy, or are currently	
		No Yes. Give specific informa	tion			
33.		ms against third parties, was against third parties, was against third parties.		-	suit or made a demand for payment ghts to sue	
		No Yes. Describe each claim.				
34.		er contingent and unliquides to set off claims	dated claims	s of every nature, includ	ding counterclaims of the debtor and	
		No Yes. Describe each claim.				
35.	Any	financial assets you did I	not already l	list		
	□ <i>,</i>	No Yes. Give specific informa	tion			
36.	— Add	the dollar value of all of y	our entries	from Part 4, including	any entries for pages you have	\$60.00
	attac	ched for Part 4. Write tha	t number he	re		\$00.00
Pa	art 5	Describe Any Bus	iness-Rela	ated Property You	Own or Have an Interest In. List ar	ny real estate in Part 1.
37.	Do y	ou own or have any legal	or equitable	e interest in any busine	ess-related property?	
		No. Go to Part 6. Yes. Go to line 38.				
						Comment orders of the
						Current value of the portion you own?  Do not deduct secured
38.	Acco	ounts receivable or comm	nissions you	ı already earned		claims or exemptions.
	☐ <i>,</i> 函 ,	No Yes. Describe				
39.		ee equipment, furnishings nples: Business-related co desks, chairs, elect	mputers, sof	ftware, modems, printers	s, copiers, fax machines, rugs, telephones,	
	口 , 图 i	No Yes. Describe				
40.	Mac	hinery, fixtures, equipme	nt, supplies	you use in business, a	nd tools of your trade	
	□ , ☑ ,	No Yes. Describe				

	Case 16-00	0300 Doc 1	Filed 01/06/16			Desc Main
Deb	tor 1 Alberto First Name	Middle Name	<u>Dorsionent</u>	Page 13 ofa5e7humbe	er (if known)	
		Middle Name	Last Name			
41.	Inventory					
	✓ No					
	Yes. Describe					
42.	Interests in partnersh	nips or joint ventures	3			
	<b>☑</b> No					
	Yes. Describe	Name of entity:			% of ownership:	
43.	Customer lists, maili	ng lists, or other con	npilations			
	<b>☑</b> No					
		is include personally	identifiable information	on (as defined in 11 U.S.C. §	§ 101(41A))?	
	□ No □ Yes. De	escribe				
44	_		at already liet			
44.	Any business-related	i property you did no	ot aiready list			
	✓ No	_				
	Yes. Give specific information					
45	Add the dollar value	of all of your entries	from Part 5, including	any entries for pages you	have	
45.				pages you		\$0.00
Pa			mmercial Fishing- in farmland, list it in	Related Property You	Own or Have	an Interest In.
	ii you owii o	nave an interest	in iariilland, iist it iii	rait i.		
46.	Do you own or have	any legal or equitable	e interest in any farm-	or commercial fishing-rela	ted property?	
	No. Go to Part 7.					
	Yes. Go to line 47					
	_					
						Current value of the
						portion you own?  Do not deduct secured
						claims or exemptions.
47.	Farm animals  Examples: Livestock,	poultry, farm-raised fi	sh			
	✓ No	pounty, familiation in	311			
	Yes					
48.	Cropseither growin	g or harvested				
		g				
	✓ No  Yes. Give specific	c				
	information					

Deb	Case 16-00300 Doc 1 Filed 01/06/16 Entered 01/06/16 15:35:45 Descriptor 1  Alberto Doros nent Page 14 @fast humber (if known)  First Name Middle Name Last Name	: Main
49.	. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
	☑ No □ Yes	
50.	. Farm and fishing supplies, chemicals, and feed	
	✓ No  Yes	
51.	. Any farm- and commercial fishing-related property you did not already list	
	✓ No  Yes. Give specific information	
52.	2. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00
Pa	Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	5. Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership	
	□ No	**
	Yes. Give specific information	\$0.00
	Worker's Compensation Employer: American Recyling Atty: Frank Christi	\$0.00
	Personal Injury Case Defendent: Burlington Norther Railroad Atty: Frank	\$0.00
54.	Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00
Pa	Part 8: List the Totals of Each Part of this Form	
55.	i. Part 1: Total real estate, line 2	\$0.00
56.	5. Part 2: Total vehicles, line 5 \$0.00	
57.	7. Part 3: Total personal and household items, line 15 \$700.00	
58.	3. Part 4: Total financial assets, line 36 \$60.00	
59.	p. Part 5: Total business-related property, line 45 \$0.00	
60.	Part 6: Total farm- and fishing-related property, line 52 \$0.00	
61.	. Part 7: Total other property not listed, line 54 + \$0.00	
62.	2. Total personal property. Add lines 56 through 61	\$760.00
63.	3. Total of all property on Schedule A/B. Add line 55 + line 62	\$760.00

Fill in this information to identify your case:						
Debtor 1	Alberto		Rios			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS						
Case number						
(if known)						

#### Official Form 106C

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Р	art 1: Identify the Property You Cl	aim as Exempt			
1. 2.	Which set of exemptions are you claiming?  ✓ You are claiming state and federal nonba  ✓ You are claiming federal exemptions. 11  For any property you list on Schedule A/B t	nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U	- ,,,,	ŕ
Brief description of the property and line on Schedule A/B that lists this property		Current value of Amount		ount of the emption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B		eck only one box for h exemption	
5 r	of description com apartment e from Schedule A/B:6	\$200.00		\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Clo	f description thes from Schedule A/B:11	\$500.00		\$500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/16 and every 3  No No No No No No Yes. Did you acquire the property covered Yes.	years after that for cas	es fi		,

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Debtor 1

Document **Alberto** First Name Middle Name Last Name

Part 2: **Additional Page** 

Brief description of the property and line on Schedule A/B that lists this property

**Current value of** the portion you own

Amount of the exemption you claim Specific laws that allow exemption

Schedule A/B

Copy the value from Check only one box for each exemption

Brief description

Cash

Line from Schedule A/B: 16

\$60.00

\$60.00 100% of fair market value, up to any

applicable statutory limit

735 ILCS 5/12-1001(b)

		Doc	ument P	20e 17	_of 57			
Fill in this inf	ormation to ide	ntify your case:						
Debtor 1	Alberto		Rios		_			
	First Name	Middle Name	Last Name					
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		-			
		- NORTHERN D	ETDICT OF III	INOIS				
	nkruptcy Court for th	ie: <u>NORTHERN DI</u>	STRICT OF ILI	LINUIS	-			
Case number (if known)				_		_	this is an	
						amende	a ming	
Official Form	106D							
		lha Haya Clai	ima Caaura	d by D	v o to o with a		4	0/4 E
Schedule D:	Creditors w	ho Have Clai	ins Secure	a by P	roperty		1.	2/15
•	•	sible. If two marrie	• •	-	•	•		
	•	s needed, copy the vrite your name and	•		number the ent	tries, and attach it	to this form.	
			. •					
		cured by your prop	•					
لكا	in all of the informat	mit this form to the cotion below.	ourt with your oth	er schedule	es. You have no	othing else to repor	on this form.	
Part 1: Lis	t All Secured C	laims						
2. List all secur	and claime. If a grad	litor has more than o	no cocured					
		or each claim. If mo		Co	olumn A	Column B	Column C	

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A

Amount of claim

Do not deduct the value of collateral

Column B Value of collateral that supports this claim Column C
Unsecured
portion
If any

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

Case	10-00300	_		age 18 of 57		.45 Desci	viaiii
Fill in this inf	ormation to i	dentify your ca		AUE 10 11 31			
Debtor 1	Alberto		Rios				
Debior 1	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bar	nkruptcy Court for	the: NORTHER	N DISTRICT OF ILL	INOIS			
Case number (if known)				_		Check if this is a	an
						amended filing	
Official Form	106E/F						
Schedule E/	F: Creditor	s Who Have	Unsecured C	laims			12/15
			t 1 for creditors with				
on Schedule A/B: Do not include any If more space is n to this page. On t	Property (Officially creditors with leeded, copy the line top of any ad	al Form 106A/B) a partially secured Part you need, fil ditional pages, w	acts or unexpired lease and on Schedule G: E claims that are listed II it out, number the erite your name and carecured Claims	xecutory Contract in Schedule D: Contries in the boxe	ts and Unexpire Creditors Who H Is on the left. At	d Leases (Officia old Claims Secur	l Form 106G). ed by Property.
_		unsecured clain	ns against you?				
□ No. Go t ✓ Yes.	to Part 2.						
<b>✓</b> Yes.							
claim. For ear show both price more space is	ch claim listed, id ority and nonprior	entify what type of ty amounts. As m ty unsecured clain	creditor has more than claim it is. If a claim huch as possible, list the continuations, fill out the Continuations.	nas both priority an e claims in alphab	d nonpriority amo	ounts, list that clair	n here and or's name. If
(For an explar	nation of each typ	e of claim, see the	instructions for this fo	rm in the instruction	n booklet.		
					Total claim	Priority amount	Nonpriority amount
2.1					\$11,000.00	\$0.00	\$11,000.00
IRS			Last 4 digits of acco	unt number			
Priority Creditor's Nam P.O Box 7346	ie		•	_			
Number Street			When was the debt i	ncurred? 200	<u> </u>		
			As of the date you fi	le, the claim is: C	heck all that app	ly.	
Philadelphia City	PA State	19101-7346 ZIP Code	☐ Contingent ☐ Unliquidated				
Who incurred the			Disputed				
Debtor 1 only			Type of PRIORITY u	nsecured claim:			
Debtor 2 only Debtor 1 and D	Oehtor 2 only		Domestic support				
	the debtors and a	another	Taxes and certain	n other debts you o	•	ent	
ــنا	claim is for a con		Claims for death	or personal injury v	while you were		
Is the claim subje	ct to offset?		intoxicated  Other. Specify				
			<b>-</b> ' '-				

✓ No ☐ Yes

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Debtor 1

Yes

First Name Middle Name Last Name

Part 1: Your PRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim **Priority** Nonpriority previous page. amount amount 2.2 \$3,970.00 \$3,970.00 \$0.00 Robert J. Adams & Associates - Last 4 digits of account number Priority Creditor's Name 901 W. Jackson, Suite 202 When was the debt incurred? 01/05/2016 Number As of the date you file, the claim is: Check all that apply. 60607 Contingent Chicago State ZIP Code Unliquidated City Who incurred the debt? Disputed Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Is the claim subject to offset? Other. Specify Attorney fees for this case

Case 16-00300 Doc 1 Filed 01/06/16 Entered 01/06/16 15:35:45 Desc Main Page 20 of 57 Case number (if known) Document Debtor 1 First Name Last Name Middle Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with you other schedules.  $\overline{\mathbf{Q}}$ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2. Total claim 4.1 \$907.00 Last 4 digits of account number Aaron's Nonpriority Creditor's Name When was the debt incurred? 7311 S. Ashland Ave As of the date you file, the claim is: Check all that apply. Number Street Contingent П Unliquidated 60636 Chicago IL Disputed ZIP Code City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: □ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Furniture Is the claim subject to offset? **☑** No Yes 4.2 \$995.00 **Allied Interstate** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 7525 W. Campus Road As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated 43054 New Albany OH ☐ Disputed State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: □ Debtor 1 only ☐ Student loans

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

that you did not report as priority claims

Other. Specify Collecting for -

Debtor 2 only

Nο  $\square$ Yes

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

Check if this claim is for a community debt

Case 16-00300 Doc 1

**Alberto** 

Document

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Debtor 1

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the

previous page.	in sequentially from the	Total claim
4.3	Last A Balta of account would be	\$2,500.00
America Cash Loans Nonpriority Creditor's Name	Last 4 digits of account number	
7460 S. Cicero Ave	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Uniquidated ☐ Contingent	
Bedford Park IL 60629 City State ZIP Code	_ ☐ Disputed	
Who incurred the debt? Check one.	T. (NONDRIGHTY	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify Payday loan	
Is the claim subject to offset?  No		
☑ No □ Yes		
4.4		\$2,500.00
American Financial Choice	Last 4 digits of account number	
Nonpriority Creditor's Name 10302 S. Halsted	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
Chicago IL 60643	☐ Unliquidated — ☐ Disputed	
City State ZIP Code  Who incurred the debt? Check one.		
Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	Other. Specify Payday loan	
Is the claim subject to offset?	_	
No Vos		
Yes		
4.5		\$500.00
Banfield Pet Hospital	Last 4 digits of account number	
Nonpriority Creditor's Name C/O I C Systems	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 64378	_ Contingent	
St. Paul MN 55164-0378	Unliquidated	
City State ZIP Code	_ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	Other. Specify <b>Medical</b>	
Is the claim subject to offset?	<u> </u>	
☑ No		
Yes		

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Debtor 1

**Alberto** 

Document

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First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
A.6  Check N Go  Nonpriority Creditor's Name 8357 S. Cottage Grove Ave.  Number Street  Chicago IL 60619  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Loan	\$1,500.00
City of chicago parking  Nonpriority Creditor's Name  121 N LaSalle Street Room 107A  Number Street  Chicago IL 60602  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify parking tickets-non dischargeable	\$5,600.00
No     Yes  4.8  Comcast  Nonpriority Creditor's Name PO Box 3002  Number Street  Southeastern PA 19398  City State ZIP Code Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  Is the claim subject to offset? □ No     Yes	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Other	\$200.00

Debtor 1

**Alberto** 

Document

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First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9 ComEd	Last 4 digits of account number	\$1,000.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 6111		
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
Carol Stream IL 60197	_ ☐ Disputed	
City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only Debtor 2 only	☐ Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify Utility	
s the claim subject to offset?		
☑ No □ Yes		
4.10		\$276.00
DIVERSIFIED CONSULTANTS	Last 4 digits of account number	
Nonpriority Creditor's Name P.O.Box 551268	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
Jacksonville FL 32255	Unliquidated	
City State ZIP Code	— ☐ Disputed	
Who incurred the debt? Check one.	Type of NONDRIORITY uncestived eleims	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans  Obligations original out of a constration agreement or diverse	
Debtor 1 and Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify Collecting for -	
s the claim subject to offset?	<u> </u>	
<b>√</b> No		
Yes		
<del>_</del>		
4.11		\$0.00
Elmhurst Memorial Hospital	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
200 Berteau Ave Number Street	As of the date you file, the claim is: Check all that apply.	
tunisti cuot	_ Contingent	
	Unliquidated	
Elmhurst IL 60126	_ ☐ Disputed	
City State ZIP Code  Who incurred the debt? Check one.	_	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Other. Specify Medical	
✓ No		
Ves		

Case 16-00300 Doc 1

Debtor 1

Alberto

Document

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First Name Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecur	ed Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
Gepffreu Dixon, MD  Nonpriority Creditor's Name 1200 S. York Rd  Number Street Suite 4280  Elmhurst IL 60126  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical	\$0.00
Harlem Furniture  Nonpriority Creditor's Name HRS USA  Number Street P.O.Box 17602  Baltimore MD 21297-1602  City State ZIP Code Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  Is the claim subject to offset? □ No □ Yes	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Furniture	\$5,500.00
4.14  IC Systems Collections  Nonpriority Creditor's Name PO Box 64378  Number Street  Saint Paul MN 55164  City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Collecting for -	\$483.00

Case 16-00300 Doc 1

Debtor 1

**Alberto** 

Document

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First Name

Last Name

Middle Name

After listing any entries on this page, number them sequentially from the previous page.  4.15   Millinois Tollway   Last 4 digits of account number   St.000.00	Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
Illinois Tollway		m sequentially from the	Total claim
Illinois Tollway   Last 4 digits of account number   Nompromory Creditor's Name   Property   Nompromory Creditor's Name   Property   Nompromory Creditor's Name   Property   Nompromory Creditor's Name   Property   Nompromory Creditor's Name   Nomp	4.15		\$1 000 00
Number   Street   When was the debt incurred?	Illinois Tollway	Last 4 digits of account number	Ψ1,000.00
As of the date you file, the claim is: Check all that apply.			
Contingent   Contingent   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 3 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 3 only   Debtor 3 only   Debtor 3 only   Debtor 4 and 5 one of the debtors and another   Debtor 5 only   Debtor 6 only   Debtor 7 only   Debtor 7 only   Debtor 1 only   Debtor 8 only   Debtor 8 only   Debtor 8 only   Debtor 8 only   Debtor 9 only   Debtor 1 only   Debtor 9 only   Debtor 1 only   Debtor 9 only   Debtor 1 only   Deb			
Downers Grove   L   60515   State 2IP Code   Who incurred the debt?   Check one.   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 3 only   Debtor 3 only   Debtor 4 only   Debtor 4 only   Debtor 5 only   Debtor 5 only   Debtor 6 only   Debtor 6 only   Debtor 6 only   Debtor 6 only   Debtor 8 only   Debtor 8 only   Debtor 9 only   Debtor 8 only   Debtor 9 only   Debtor 1 only   Debtor 9 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 1 only   Debtor 2	Number Street		
Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 3 only   Debtor 3 only   Debtor 4 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 5 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 3 only   Debtor 3 only   Debtor 4 only   Debtor 4 only   Debtor 5 only   Debtor 5 only   Debtor 6 only   Debtor 6 only   Debtor 6 only   Debtor 6 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debto	D		
Who incurred the debt? Check one.		_ Disputed	
Debtor 1 only		Type of NONPPIOPITY unsecured claim:	
Debtor 1 and Debtor 2 only			
Section   Fair Use Decided 2 Giny   Al least one of the debtors and another			
Check if this claim is for a community debt is the claim subject to offset?			
is the claim subject to offset?    No   Yes   Ves   Ve			
No   Yes   State   Zip Code   Student loans	<b>—</b>	Other. Specify Other	
A 16			
Injured Workers Pharmacy Nonpriority Creditor's Name 300 Federal St Number Street  Andover MA 01810 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check iff this claim is for a community debt is the claim subject to offset?  4.17			
Monporory Creditor's Name   Street	4.16		\$0.00
Street   As of the date you file, the claim is: Check all that apply.   Contingent   Uniquidated   Disputed		Last 4 digits of account number	
Andover MA 01810 City State ZIP Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Check if this claim is for a community debt is the claim subject to offset?  No Yes  4.17 Lest 4 digits of account number Nonpriority Creditor's Name 300 W, Butterfiled Rd Number Street  Mo incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor 3 and another Debtor 4 and Debtor 2 only Debtor 5 are a community debt is the claim subject to offset?  No Yes  4.17 Lest 4 digits of account number Nonpriority Creditor's Name 300 W, Butterfiled Rd Number Street  As of the date you file, the claim is: Check all that apply.  \$0.00		When was the debt incurred?	
Andover MA 01810		As of the date you file, the claim is: Check all that apply.	
Andover		_ Contingent	
Disputed   Disputed	Andover MA 01810		
Debtor 1 only		— ☐ Disputed	
Debtor 1 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	# <b>.</b>		
At least one of the debtors and another   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Medical		Obligations arising out of a separation agreement or divorce	
□ Check if this claim is for a community debt Is the claim subject to offset?  □ No Yes  □ 4.17  ■ Kevin Koutsky M, MD  Nonpriority Creditor's Name 300 W, Butterfiled Rd  Number Street  ■ Check if this claim is for a community debt is the claim subject to offset?  □ Contingent Unliquidated □ Disputed  □ Debtor 1 only □ Debtor 1 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ No □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim			
Is the claim subject to offset?  No Yes  4.17  Kevin Koutsky M, MD  Nonpriority Creditor's Name 300 W, Butterfiled Rd  Number Street  Men was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  No  \$0.00  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Medical  Other. Specify Medical			
No   Yes   State   Street		☑ Other. Specify Medical	
Yes			
Solution			
Kevin Koutsky M, MD  Nonpriority Creditor's Name 300 W, Butterfiled Rd  Number Street    Contingent   Unliquidated   Disputed   Debtor 1 only   Debtor 1 and Debtor 2 only   At least one of the debtors and another   Check if this claim is for a community debt   Is the claim subject to offset?   As 4 digits of account number   When was the debt incurred?   As 6 the date you file, the claim is: Check all that apply.   Contingent   Unliquidated   Disputed   Disputed   Type of NONPRIORITY unsecured claim:   Student loans   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Debts to pension or profit-sharing plans, and other similar debts   Wedical   Medical			
Nonpriority Creditor's Name 300 W, Butterfiled Rd  Number Street     Contingent   Unliquidated   Disputed   Debtor 1 only   Debtor 2 only   Debtor 1 and Debtor 2 only   At least one of the debtors and another   Check if this claim is for a community debt   Is the claim subject to offset?   No	4.17		\$0.00
300 W, Butterfiled Rd  Number Street  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt Is the claim subject to offset?  When was the debt mictired?  As of the date you file, the claim is: Check all that apply.  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	Kevin Koutsky M, MD	Last 4 digits of account number	
As of the date you file, the claim is: Check all that apply.   Contingent   Unliquidated   Disputed	• •	When was the debt incurred?	
Elmhurst   L   60126		As of the date you file, the claim is: Check all that apply.	
Elmhurst   L   60126			
City State ZIP Code  Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  Is the claim subject to offset? □ No	Elmburet II 60126	<b>—</b>	
Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No		— ☐ Disputed	
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No	•	Type of NONPRIORITY unsecured claim:	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only ☑ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No		•••	
that you did not report as priority claims  ✓ At least one of the debtors and another  ☐ Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No	<b>L</b> =		
☐ Check if this claim is for a community debt  Is the claim subject to offset?  ☐ No  Debts to pension or profit-sharing plans, and other similar debts  ☐ Other. Specify Medical	<b>=</b>		
Is the claim subject to offset?  ✓ No	ш		
☑ No	_		
	<u>.</u>		

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Part 2:

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Debtor 1 **Alberto** 

First Name Middle Name Last Name

### Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them previous page.	n sequentially from the	Total claim
A.18   Matek Law Offices, P.C.	Last 4 digits of account number 3 3 0 1  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Attorney for - Selective Insurance	\$0.00
Payday Loan Nonpriority Creditor's Name 7001 N. Clark Number Street  Chicago IL 60626 City State ZIP Code Who incurred the debt? Check one.	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:	\$1,500.00
□ Debtor 2 only □ Debtor 1 and Debtor 2 only ☑ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes	<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☑ Other. Specify payday loan</li> </ul>	
4.20		\$853.00
People gas	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	
City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No Yes	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Utility	

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Alberto

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Debtor 1

First Name Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
A.21  PLS  Nonpriority Creditor's Name 2132 E. 71st St.  Number Street  Chicago IL 60649  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Other	\$3,000.00
Mo	Last 4 digits of account number 3 3 0 1  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	\$4,472.34
Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No	□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Civil Judgment □ Last 4 digits of account number □ When was the debt incurred? □ As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical	\$0.00
Is the claim subject to offset?  ✓ No  ☐ Yes		

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Debtor 1

**Alberto** 

Document

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.24 T. Mh.ila	Look A digita of account number	\$0.00
T-Mobile Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 37380	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
Albuquerque NM 87176	Unliquidated	
City State ZIP Code	— ☐ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	Other. Specify cell phone	
✓ No		
Yes		
4.25		\$1,000.00
Target	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 9475 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	☐ Unliquidated	
Minneapolis MN 55440	_ ☐ Disputed	
City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	Other. Specify Credit Card	
Is the claim subject to offset?	<u> </u>	
No Voc		
Yes		
4.26		\$0.00
US Cellular	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 7835 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Succi	□ Contingent	
	Unliquidated	
Madison WI 53707-7835	_ ☐ Disputed	
City State ZIP Code	<b>-</b>	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Cellular Phone	
Is the claim subject to offset?	<u> </u>	
☑ No		
Yes		

Debtor 1 Alberto

perto

Document

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First Name Middle Name Last Name

# Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nomi art i	6b.	Taxes and certain other debts you owe the government	6b.	\$11,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. <b>-</b>	\$3,970.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d.	\$14,970.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i. <b>-</b>	\$33,786.34
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j.	\$33,786.34

Fill in this info	ormation to i	dentify your case	:
Debtor 1	Alberto		Rios
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court fo	r the: <b>NORTHERN D</b>	ISTRICT OF ILLINOIS
Case number			
(if known)			

#### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1.	Do you have any executory contracts or unexpired leases?
	No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
	Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

				ument Page:	21.01.2	1	
Fill	n this inf	ormation to i	dentify your case:				
Debto	or 1	Alberto		Rios			
		First Name	Middle Name	Last Name			
Debto (Spou	or 2 use, if filing)	First Name	Middle Name	Last Name			
` .	. 0,			ISTRICT OF ILL INOIS			
		nkruptcy Court for	the: <b>NORTHERN D</b>	ISTRICT OF ILLINOIS			
Case (if kno	number own)					Check if this is an amended filing	
Offic	ial Form	106H					
Sche	edule H	Your Code	ebtors				12/1
two maneeded	arried peop d, copy the On the top	le are filing toge Additional Page, of any Additiona	ther, both are equally fill it out, and numbe I Pages, write your n	responsible for supplying the entries in the boxes ame and case number (i	ng corrects on the	complete and accurate as possible. If ct information. If more space is left. Attach the Additional Page to this . Answer every question.	
1. Do □ ☑	] No	any codeptors?	(ir you are filing a joi	nt case, do not list either	spouse a	s a codebtor.)	
ind	No. Go t No. Go t Yes. Did No Yes Column 1, erson show editor on S	na, California, Idal to line 3. I your spouse, for list all of your co n in line 2 again schedule D (Offic	no, Louisiana, Nevada, mer spouse, or legal ed odebtors. Do not incl as a codebtor only if	New Mexico, Puerto Rico quivalent live with you at t ude your spouse as a co that person is a guarant dule E/F (Official Form 1	o, Texas, the time?	Community property states and territories Washington, and Wisconsin.)  Tyour spouse is filling with you. List the signer. Make sure you have listed the or Schedule G (Official Form 106G). Use	
	Column 1:	Your codebtor			Co.	lumn 2: The creditor to whom you owe	the debt
					Ch	eck all schedules that apply:	
3.1		Name Not Ente	red			Schedule D, line	
	Name					Schedule E/F, line 4.1	
	Number	Street			- <b>☑</b>	<u></u>	
					- ∐ ^a	Schedule G, line ron's	
	City		State	ZIP Code	_ Aa	1011 5	
	•	No. 5	d				
3.2	Name	Name Not Ente	rea		_ 🗆	Schedule D, line	
	Number	Street			<b>-</b>	Schedule E/F, line 4.2	
					– П	Schedule G, line	
					All	ied Interstate	
	City		State	ZIP Code	_		
3.3	Spouse N	Name Not Ente	red			Schodulo D. lino	
-	Name				_ 🗆	Schedule D, line	
	Number	Street			<b>-</b>	Schedule E/F, line 4.3	
					_ 🗆	Schedule G, line	
					An	nerica Cash Loans	

ZIP Code

State

City

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Alberto

**Dorcius**ment

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First Name Middle Name

	Additional Page to List N	More Code	btors	
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.4	Spouse Name Not Entered			Schedule D, line
	Name			
	Number Street			Schedule E/F, line 4.4
				Schedule G, line American Financial Choice
	City	State	ZIP Code	— American Financial Choice
2.5	Spouse Name Not Entered			
3.5	Name			Schedule D, line
	Number Street			Schedule E/F, line 4.5
				Schedule G, line
				Banfield Pet Hospital
	City	State	ZIP Code	
3.6	Spouse Name Not Entered Name			Schedule D, line
	Name			<u> </u>
	Number Street			<u> </u>
				Schedule G, line Check N Go
	City	State	ZIP Code	— Check in Go
	•			
3.7	Spouse Name Not Entered Name			Schedule D, line
	Number Street			Schedule E/F, line 4.7
				Schedule G, line
				City of chicago parking
	City	State	ZIP Code	
3.8	Spouse Name Not Entered			─ ☐ Schedule D, line
	Name			
	Number Street			Schedule E/F, line 4.8
				Schedule G, line
	City	State	ZIP Code	Comcast
	•		••••	
3.9	Spouse Name Not Entered Name			Schedule D, line
	Number Street			Schedule E/F, line4.9
				Schedule G, line
				ComEd
	City	State	ZIP Code	_
3.10	Spouse Name Not Entered			— Schadula Dilino
	Name			Schedule D, line
	Number Street			Schedule E/F, line 4.10
				Schedule G, line
	City	Stata	7ID Codo	DIVERSIFIED CONSULTANTS

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Alberto

First Name

Middle Name

**Dorcius**ment Last Name

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**Additional Page to List More Codebtors** 

	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.11	Spouse Name Not Entered			Schodulo D. lino
	Name			Schedule D, line
	Number Street			Schedule E/F, line 4.11
				Schedule G, line Elmhurst Memorial Hospital
	City	State	ZIP Code	Elinnurst Memoriai Hospitai
0.40	Spouse Name Not Entered			
3.12	Name			Schedule D, line
	Number Street			Schedule E/F, line 4.12
				Schedule G, line
	<del></del>			Gepffreu Dixon, MD
	City	State	ZIP Code	
3.13	Spouse Name Not Entered Name			Schedule D, line
	Number Street			Schedule E/F, line 4.13
	Number Street			Schedule G, line
				Harlem Furniture
	City	State	ZIP Code	<del>_</del>
3.14	Spouse Name Not Entered			Schedule D, line
	Name			<u> </u>
	Number Street			Schedule E/F, line 4.14
				Schedule G, line IC Systems Collections
	City	State	ZIP Code	
3.15	Spouse Name Not Entered			
3.13	Name			Schedule D, line
	Number Street			Schedule E/F, line 4.15
	-			Schedule G, line
	City	State	ZIP Code	Illinois Tollway
	•	Olale	Zii Gode	
3.16	Spouse Name Not Entered Name			Schedule D, line
	Number Street			Schedule E/F, line 4.16
				Schedule G, line
				Injured Workers Pharmacy
	City	State	ZIP Code	
3.17	Spouse Name Not Entered			Schedule D, line
				Schedule E/F, line 2.1
	Number Street			
				IRS
	City	State	ZIP Code	<del></del>

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Alberto

City

First Name

Middle Name

Last Name

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**Additional Page to List More Codebtors** Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: **Spouse Name Not Entered** 3.18 Schedule D, line Schedule E/F, line 4.17 Number Street ☐ Schedule G, line Kevin Koutsky M, MD State ZIP Code **Spouse Name Not Entered** 3.19 Schedule D, line Schedule E/F, line 4.18 Number Schedule G, line Matek Law Offices, P.C. ZIP Code State **Spouse Name Not Entered** 3.20 ☐ Schedule D, line Schedule E/F, line 4.19 Number Street □ Schedule G, line Payday Loan State ZIP Code **Spouse Name Not Entered** 3.21 ☐ Schedule D, line Schedule E/F, line 4.20 Number Street Schedule G, line People gas City State ZIP Code 3.22 **Spouse Name Not Entered** ☐ Schedule D, line Schedule E/F, line 4.21 Number Street ☐ Schedule G, line PLS State ZIP Code Spouse Name Not Entered 3.23 Schedule D, line Schedule E/F, line Number Street Schedule G, line Robert J. Adams & Associates ZIP Code State **Spouse Name Not Entered** 3.24 Schedule D, line Schedule E/F, line 4.22 Number Street ☐ Schedule G, line Selective Insurance Company of America

ZIP Code

State

Debtor 1 Alberto

City

First Name

Middle Name

State

ZIP Code

Dorwsnent Last Name Page 35 of 5-humber (if known)

	Additional Page to List More Codebtors	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
		Check all schedules that apply:
3.25	Spouse Name Not Entered	Schedule D, line
		Schedule E/F, line 4.23
	Number Street	Schedule G, line
		St. Mary Hospital
	City State ZIP Code	
3.26	Spouse Name Not Entered	Schedule D, line
	Number Street	Schedule E/F, line 4.24
		Schedule G, line
		T-Mobile
	City State ZIP Code	
3.27	Spouse Name Not Entered Name	Schedule D, line
	Number Street	Schedule E/F, line 4.25
		Schedule G, line
		Target
	City State ZIP Code	
3.28	Spouse Name Not Entered Name	Schedule D, line
	Number Street	Schedule E/F, line 4.26
		Schedule G, line
		US Cellular

		Doci	ıment Pa	ae 3	6 of 57		
Fill in this infor	mation to identify	your case:					
Debtor 1	Alberto		Rios				
	First Name	Middle Name	Last Name			Che	ck if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				An amended filing
				LINO	16		A supplement showing postpetition
	kruptcy Court for the:	NORTHERN	DISTRICT OF IL	LINO			chapter 13 income as of the following date:
Case number (if known)				_			MM / DD / YYYY
-							ININI / DD / TTTT
Official Form 1							
Schedule I: Yo	our Income						12/15
include information a about your spouse. your name and case	about your spouse. If more space is nee	f you are separ ded, attach a se Answer every o	ated and your spo eparate sheet to th	ouse is	not filing w	ith y	spouse is living with you, ou, do not include information any additional pages, write
Fill in your emplinformation.	oyment		Dahtar 4				Dahtar 2 ar yan filing anayar
If you have more			Debtor 1				Debtor 2 or non-filing spouse
job, attach a sepa with information a		yment status	<ul><li>☐ Employed</li><li>✓ Not employed</li></ul>	ad			<ul><li>☐ Employed</li><li>✓ Not employed</li></ul>
additional employ	vers.	-4:		cu			• Not employed
Include part-time	Occup	ation	Disabled				
or self-employed		yer's name					
Occupation may	include <b>F</b>						
student or homer	=p.o	yer's address	Number Street				Number Street
applies.							
							_
			City		Ctata Zin Ca	40	City. Chata 7in Code
			City		State Zip Co	ae	City State Zip Code
	How Id	ong employed t	here?				
Part 2: Give	Details About Mo	nthly Incom	е				
Estimate monthly inconon-filing spouse unle			n. If you have noth	ing to	report for any	/ line,	, write \$0 in the space. Include your
٠.	g spouse have more t	han one employ	er, combine the inf	ormati	on for all emp	oloyer	rs for that person on the lines below. If
					For Debtor	1	For Debtor 2 or non-filing spouse
	oss wages, salary, ar s). If not paid monthly			2.	\$0	.00	\$0.00
3. Estimate and lis	t monthly overtime p	ay.		3. +	\$0	.00	\$0.00
4. Calculate gross	income. Add line 2	+ line 3.		4.	\$0	.00	\$0.00

\$0.00

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Debtor 1 Alberto

First Name Last Name Middle Name

			F -	For Debtor 1	For Debte		_	
	Copy line 4 here		4.	\$0.00		\$0.00		
5.	List all payroll de	eductions:				<u> </u>		
	5a. Tax, Medica	re, and Social Security deductions	5a.	\$0.00		\$0.00		
	5b. Mandatory o	contributions for retirement plans	5b.	\$0.00		\$0.00		
	5c. Voluntary co	ontributions for retirement plans	5c.	\$0.00		\$0.00		
	5d. Required rep	payments of retirement fund loans	5d.	\$0.00		\$0.00		
	5e. Insurance		5e.	\$0.00		\$0.00		
	5f. Domestic su	pport obligations	5f.	\$0.00		\$0.00		
	5g. Union dues		5g.	\$0.00		\$0.00		
	5h. Other deduction Specify:	tions.	5h. <b>+</b>	\$0.00		\$0.00		
6.	Add the payroll d	<b>leductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f +	6.	\$0.00		\$0.00		
7.	Calculate total m	onthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00		\$0.00		
8.	List all other inco	ome regularly received:						
		from rental property and from operating a rofession, or farm	8a.	\$0.00		\$0.00		
	gross receipt	ement for each property and business showing s, ordinary and necessary business expenses, and thly net income.						
	8b. Interest and	dividends	8b.	\$0.00		\$0.00		
		ort payments that you, a non-filing spouse, or a egularly receive	8c.	\$0.00		\$0.00		
	Include alimo	ony, spousal support, child support, maintenance, ement, and property settlement.						
	8d. Unemploym	ent compensation	8d.	\$0.00		\$0.00		
	8e. Social Secu	rity	8e.	\$1,707.00		\$0.00		
	Include cash cash assistar (benefits und or housing su	nment assistance that you regularly receive assistance and the value (if known) or any non- nce that you receive, such as food stamps ler the Supplemental Nutrition Assistance Program) ubsidies.						
	Specify:		- 8f.	<u>\$0.00</u>		\$0.00		
	•	etirement income	8g.	\$0.00		\$0.00		
	8h. Other month Specify: for		8h. <b>+</b>	\$96.00		\$0.00		
9.	Add all other inco	<b>ome.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$1,803.00		\$0.00		
10.	Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					\$0.00	=[	\$1,803.00
11.	<ol> <li>State all other regular contributions to the expenses that you list in Schedule J.         Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.     </li> </ol>							
	Do not include any	y amounts already included in lines 2-10 or amounts that	at are no	t available to pay e	xpenses lis	ted in Sch	edu	
						_ 11. •	<b>+</b> 	\$0.00
12.		in the last column of line 10 to the amount in line 11. at amount on the Summary of Your Assets and Liabilities				12.	C	\$1,803.00 ombined
13.		n increase or decrease within the year after you file t	his forn	n?			_	onthly income
	✓ No.	None.						
	Yes. Explain:							

Case 16-00300 Doc 1 Filed 01/06/16 Entered 01/06/16 15:35:45 Desc Main Page 38 of 57 Document Fill in this information to identify your case: Check if this is: An amended filing Debtor 1 Alberto Rios Middle Name First Name Last Name A supplement showing postpetition chapter 13 expenses as of the Debtor 2 following date: Middle Name (Spouse, if filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS MM / DD / YYYY Case number (if known) Official Form 106J **Schedule J: Your Expenses** 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. **Describe Your Household** 

Part 1: Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. П Do you have dependents? No Dependent's relationship to Dependent's Does dependent Yes. Fill out this information  $\square$ Do not list Debtor 1 and Debtor 1 or Debtor 2 age live with you? for each dependent..... Debtor 2. No Son 18  $\overline{\mathbf{Q}}$ Yes Do not state the dependents' No names. **Daughter** 16  $\sqrt{\phantom{a}}$ Yes No Yes Nο Yes No Do vour expenses include No expenses of people other than Yes yourself and your dependents?

### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4.	The rental or home ownership expenses for your residence.	4.	\$200.00
	Include first mortgage payments and any rent for the ground or lot.		<u> </u>
	If not included in line 4:		
	4a. Real estate taxes	4a.	
	4b. Property, homeowner's, or renter's insurance	4b.	
	4c. Home maintenance, repair, and upkeep expenses	4c.	
	4d. Homeowner's association or condominium dues	4d.	

Your expenses

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Debtor 1 Alberto

Middle Name

First Name

Document

Last Name

Your expenses Additional mortgage payments for your residence, such as home equity loans 5. 5. **Utilities:** 6a. Electricity, heat, natural gas 6a. \$200.00 6b. Water, sewer, garbage collection 6b \$270.00 6c. Telephone, cell phone, Internet, satellite, and 6c. cable services 6d. 6d. Other. Specify: Food and housekeeping supplies 7. \$650.00 Childcare and children's education costs 8. 9. Clothing, laundry, and dry cleaning 9. \$30.00 10. Personal care products and services 10. \$60.00 11. Medical and dental expenses 11. \$60.00 12. Transportation. Include gas, maintenance, bus or train 12. \$130.00 fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13. magazines, and books 14. Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. Vehicle insurance 15c. 15d. Other insurance. Specify: 15d. **16. Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. Other. Specify: 17c. 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. 19. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. 20b. Real estate taxes 20h. 20c. Property, homeowner's, or renter's insurance 20c. 20d. Maintenance, repair, and upkeep expenses 20d.

20e. Homeowner's association or condominium dues

20e.

Deb	-	Case 16-00300 Doc 1 Filed 01/06/16 Entered 01/06/16 15:3    Alberto   Document   Page 40 of   Case number	85:45 (if known	Desc Main				
	ı	-rist Name Middle Name Last Name						
21.	Othe	r. Specify:	21.	·				
22.	Calcu	alate your monthly expenses.	_					
	22a.	Add lines 4 through 21.	22a.	\$1,600.00				
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.					
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$1,600.00				
23.	Calcu	ulate your monthly net income.	_					
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$1,803.00				
	23b.	Copy your monthly expenses from line 22c above.	23b. <b>_</b>	\$1,600.00				
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$203.00				
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you file this form?						
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?							
	_	No. Yes. Explain here:						
	П	None.						

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F	ill in this inf	ormation to i	dentify yo				51			
	ebtor 1	Alberto	Net I II N		Rios					
		First Name	Middle N	Name	Last Name					
	ebtor 2 Spouse, if filing)	First Name	Middle N	Name	Last Name					
ا ا ر	Inited States Ba	nkruptcy Court for	r the: <b>NORT</b>	HERN D	ISTRICT OF	ILLINOIS				
	ase number	, ,						<b>—</b> a:		
	f known)								eck if this is an ended filing	
_	··· · · -	4000					_			
_	fficial Form							_		
Sı	ummary of	Your Asse	ets and L	_iabilit	ies and C	ertain Stat	tistical In	formation	n	12/15
	Part 1: Su	mmarize You	ASSCIS						Your assets Value of wha	
1.	Schedule A/B	: Property (Officia	al Form 106A	/B)						•
	1a. Copy line	e 55, Total real es	tate, from So	chedule A/	B					\$0.00
	1b. Copy line	e 62, Total person	al property, f	from Sche	dule A/B					\$760.00
	1c. Copy line	e 63, Total of all p	roperty on So	chedule A	/B					\$760.00
G	Part 2: Sur	mmarize You	r Liabilitie	es						
									Your liabil	
2.									Amount yo	u owe

	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$14,970.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$33,786.34

Your total liabilities

\$48,756.34

### Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,803.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,600.00

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**Alberto** First Name **Dorcius**ment

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Debtor 1

Part 4:

Middle Name

### **Answer These Questions for Administrative and Statistical Records**

6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?
	<ul> <li>No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> <li>✓ Yes</li> </ul>
7.	What kind of debt do you have?
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11: OR. Form 122B Line 11: OR. Form 122C-1 Line 14 \$0.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$11,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$11,000.00

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Cusc	10-00300			43 of 57
Fill in this inf	ormation to i	dentify your case		01
Debtor 1	Alberto		Rios	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
		or the: NORTHERN D	ISTRICT OF ILLINOIS	3
Case number (if known)				Check if this is an amended filing
Official Form	106Dec			
Declaration	About an I	ndividual Debt	or's Schedules	12/15
concealing prope \$250,000, or impri	rty, or obtaining	money or property by		schedules. Making a false statement, ith a bankruptcy case can result in fines up to 1519, and 3571.
Did you pay	or agree to pay s	someone who is NOT	an attorney to help you	i fill out bankruptcy forms?
<b>☑</b> No				
Yes. Na	ame of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalt	ty of perjury, I de	eclare that I have read	the summary and sch	edules filed with this declaration and that they are

true and correct.

X /s/ Alberto Rios	X
Signature of Debtor 1	Signature of Debtor 2
Date 01/06/2016	Date
MM / DD / YYYY	MM / DD / YYYY

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Fill in this inf	ormation to i	dentify your case							
Debtor 1	Alberto First Name	Middle Name	Rios Last Name						
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name						
United States Ba	inkruptcy Court for	r the: <b>NORTHERN D</b>	ISTRICT OF IL	LINOIS					
Case number (if known)				_			Check if the amended fi		
Official Form		Affairs for Ind	ividuals Fi	iling for Ba	ankrupto	<b>с</b> у			12/15
correct information	on. If more space ase number (if kn	ossible. If two marrie e is needed, attach a own). Answer every out Your Marital S	separate sheet question.	to this form. O	n the top of	any additi			
1. What is your  ✓ Married  ☐ Not marri	current marital s	atatus?							
<b>☑</b> No	•	you lived anywhere o		•					
Debtor 1:			tes Debtor 1 ed there	Debtor 2:				Dates Debt	or 2
		ou ever live with a spo d territories include Ari	•					•	

Washington, and Wisconsin.)

**☑** No

Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

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Alberto

Dorment

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Debtor 1

First Name Middle Name Last Name

Part 2:	Explain the Sources of Y	our Income

<ul><li>No</li><li>✓ Yes. Fill in the details.</li></ul>					
	Debtor 1		Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions	
From January 1 of the current year un the date you filed for bankruptcy:	bonuses, tips	\$0.00	Wages, commissions, bonuses, tips		
	Operating a business		Operating a business		
For the last calendar year:	₩ Wages, commissions, bonuses, tips	\$37,000.00	Wages, commissions, bonuses, tips		
(January 1 to December 31, 2015)	Operating a business		Operating a business		
For the calendar year before that:	☐ Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips		
/ I 4 ( - D b 04 004 4 - \	20.10000, 11.00		20		
<u></u>	er that income is taxable. Example nefit payments; pensions; rental inc	es of other income are come; interest; dividen	ds; money collected from lav	vsuits; royalties;	
5. Did you receive any other income Include income regardless of wheth unemployment; and other public be and gambling and lottery winnings.	during this year or the two prever that income is taxable. Example nefit payments; pensions; rental income in a joint case and you have	es of other income are come; interest; dividen- lave income that you re	alimony; child support; Socials; money collected from law eceived together, list it only of	vsuits; royalties;	
5. Did you receive any other income Include income regardless of wheth unemployment; and other public be and gambling and lottery winnings. Debtor 1.  List each source and the gross inco	during this year or the two prever that income is taxable. Example nefit payments; pensions; rental income in a joint case and you have	es of other income are come; interest; dividen- lave income that you re	alimony; child support; Socials; money collected from law eceived together, list it only of	vsuits; royalties;	
5. Did you receive any other income Include income regardless of wheth unemployment; and other public be and gambling and lottery winnings. Debtor 1.  List each source and the gross inco	er that income is taxable. Example nefit payments; pensions; rental income in a joint case and you have from each source separately.	es of other income are come; interest; dividen- lave income that you re	alimony; child support; Sociods; money collected from law eceived together, list it only on that you listed in line 4.	vsuits; royalties;	
5. Did you receive any other income Include income regardless of wheth unemployment; and other public be and gambling and lottery winnings. Debtor 1.  List each source and the gross income No Yes. Fill in the details.	reduring this year or the two prevers that income is taxable. Example nefit payments; pensions; rental income in a joint case and you have from each source separately.  Debtor 1  Sources of income Describe below.	es of other income are come; interest; dividence ave income that you result to the come. The come that you result to the come income in	alimony; child support; Sociods; money collected from law eccived together, list it only of that you listed in line 4.  Debtor 2  Sources of income	wsuits; royalties; once under  Gross income from each source (before deductions	
5. Did you receive any other income Include income regardless of wheth unemployment; and other public be and gambling and lottery winnings. Debtor 1.  List each source and the gross income No Yes. Fill in the details.	reduring this year or the two prevers that income is taxable. Example nefit payments; pensions; rental income in a joint case and you have from each source separately.  Debtor 1  Sources of income Describe below.	es of other income are come; interest; dividence ave income that you result to the come. The come that you result to the come income in	alimony; child support; Sociods; money collected from law eccived together, list it only of that you listed in line 4.  Debtor 2  Sources of income	wsuits; royalties; once under  Gross income from each source (before deductions	
5. Did you receive any other income Include income regardless of wheth unemployment; and other public be and gambling and lottery winnings. Debtor 1.  List each source and the gross income No Yes. Fill in the details.  From January 1 of the current year unthe date you filed for bankruptcy:  For the last calendar year: (January 1 to December 31, 2015)	reduring this year or the two prevers that income is taxable. Example nefit payments; pensions; rental income in a joint case and you have from each source separately.  Debtor 1  Sources of income Describe below.	es of other income are come; interest; dividence ave income that you result to the come. The come that you result to the come income in	alimony; child support; Sociods; money collected from law eccived together, list it only of that you listed in line 4.  Debtor 2  Sources of income	wsuits; royalties; once under  Gross income from each source (before deductions	
Include income regardless of wheth unemployment; and other public be and gambling and lottery winnings. Debtor 1.  List each source and the gross inco	reduring this year or the two prevers that income is taxable. Example nefit payments; pensions; rental income in a joint case and you have from each source separately.  Debtor 1  Sources of income Describe below.	es of other income are come; interest; dividence ave income that you result to the come. The come that you result to the come income in	alimony; child support; Sociods; money collected from law eccived together, list it only of that you listed in line 4.  Debtor 2  Sources of income	wsuits; royalties; once under  Gross income from each source (before deductions	

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Debtor 1 Alberto Dormanne Middle Name Last Name Last Name Last Name

				Debtor 1		Debtor 2			
				Sources of income Describe below.		ch source leductions	Sources of Describe be		Gross income from each source (before deductions and exclusions
	From January 1 of the current year until the date you filed for bankruptcy:  For the last calendar year: (January 1 to December 31, 2015)		social security		\$1,487.00				
			social security		\$3,655.00				
		-	pefore that: 31, <u>2014</u> )						
Р	art 3:	List Ce	ertain Payments \	You Made Before Y	ou Filed for	Bankrupt	tcy		
6.	Are eithe			ots primarily consumer		•			
	□ No.			2 has primarily consumarily for a personal, fam			s are defined	d in 11 U.S.C. §	101(8) as
		During tl	he 90 days before you	ı filed for bankruptcy, dic	d you pay any cr	editor a tota	l of \$6,225* (	or more?	
		□ No.	Go to line 7.						
		☐ Yes.	total amount you paid	itor to whom you paid a did that creditor. Do not in mony. Also, do not inclu	nclude payments	for domest	ic support ob	ligations, such	
		* Subjec	ct to adjustment on 4/0	01/16 and every 3 years	after that for cas	ses filed on	or after the d	ate of adjustme	nt.
	✓ Yes.	Debtor '	1 or Debtor 2 or both	have primarily consur	ner debts.				
		During tl	he 90 days before you	ı filed for bankruptcy, dic	d you pay any cr	editor a tota	l of \$600 or r	more?	
		☑ No.	Go to line 7.						
		☐ Yes.	creditor. Do not inclu	itor to whom you paid a sude payments for domest payments to an attorney	stic support obliq	ations, such		, ,	ny.
				Dates of	Total amoun	t Amoi	unt you	Was this pay	ment for

paid

stil owe

payment

Page 47 of 57 number (if known) Alberto Dorcio ment Debtor 1 Middle Name 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony. **☑** No ☐ Yes. List all payments to an insider. Dates of **Total amount** Amount you Reason for this payment payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Reason for this payment **Total amount** Amount you payment paid still owe Include creditor's name Identify Legal Actions, Repossessions, and Foreclosures Part 4: Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. **☑** No ☐ Yes. Fill in the details. Nature of the case Court or agency Status of the case 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **☑** No ☐ Yes. Fill in the details. 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? **☑** No ☐ Yes

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Case 16-00300

Case 16-00300 Filed 01/06/16 Entered 01/06/16 15:35:45 Desc Main Doc 1 **Alberto** Dorment Dorment Page 48 of 5-7 humber (if known) Debtor 1 Middle Name Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? **☑** No Yes. Fill in the details for each gift or contribution. Part 6: **List Certain Losses** 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? **☑** No Yes. Fill in the details. Part 7: **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy. □ No Yes. Fill in the details. Description and value of any property transferred Date payment Amount of or transfer was payment Robert J. Adams & Associates made Person Who Was Paid 901 W. Jackson, Suite 202 01/05/2016 \$30.00 Number Street Chicago 60607 City ZIP Code Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. **☑** No

☐ Yes. Fill in the details.

Deb	Case 16-00300 Doc 1 Filed 01/06/16 Entered 01/06/16 15:35:45 Desc Main or 1 Alberto Document Page 49 of 5-7 number (if known)
	First Name Middle Name Last Name
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?
	Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property).  Do not include gifts and transfers that you have already listed on this statement.
	✓ No  Yes. Fill in the details.
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)
	✓ No ☐ Yes. Fill in the details.
Pa	rt 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.
	✓ No ☐ Yes. Fill in the details.
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?
	✓ No ☐ Yes. Fill in the details.
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?  No
	Yes. Fill in the details.
Pa	rt 9: Identify Property You Hold or Control for Someone Else
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.
	✓ No Yes. Fill in the details.

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**Alberto** Debtor 1

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Page 50 of 5 humber (if known)

First Name Middle Name Last Name

**Part 10: Give Details About Environmental Information** 

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.
Re	port all notices, releases, and proceedings that you know about, regardless of when they occurred.
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?
	✓ No ☐ Yes. Fill in the details.
25.	Have you notified any governmental unit of any release of hazardous material?  ✓ No  ✓ Yes. Fill in the details.
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.
	✓ No ☐ Yes. Fill in the details.
F	art 11: Give Details About Your Business or Connections to Any Business
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?
	<ul> <li>A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time</li> <li>A member of a limited liability company (LLC) or limited liability partnership (LLP)</li> <li>A partner in a partnership</li> <li>An officer, director, or managing executive of a corporation</li> <li>An owner of at least 5% of the voting or equity securities of a corporation</li> </ul>
	<ul><li>✓ No. None of the above applies. Go to Part 12.</li><li>✓ Yes. Check all that apply above and fill in the details below for each business.</li></ul>
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.
	☐ No ☐ Yes. Fill in the details below.

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Debtor 1 Alberto Dorsinent Page 51 @a5number (if known)

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First Name Middle Name

Last Name

\_\_\_\_

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Al	berto Rios	X	
Signa	ture of Debtor 1	Signature of Debtor 2	
Date	01/06/2016	Date	
Did you	attach additional pages to You	tatement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	
<b>√</b> No			
Yes			
Did you	pay or agree to pay someone v	is not an attorney to help you fill out bankruptcy forms?	
<b>√</b> No			
	Name of person	Attach the Bankruptcy Petition Preparer's Notice	сe,
_		Declaration, and Signature (Official Form 119).	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
   Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

# Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Ba$ 

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

In	re Alberto Rios	Case No.	
		Chapter	13
	DISCLOSURE OF COMPENSATION OF A	ATTORNEY FOR	DEBTOR
1.	. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that that compensation paid to me within one year before the filing of the peti services rendered or to be rendered on behalf of the debtor(s) in contem is as follows:	tion in bankruptcy, or	agreed to be paid to me, for
	For legal services, I have agreed to accept	\$4	4,000.00
	Prior to the filing of this statement I have received		\$30.00
	Balance Due	<u>\$</u>	3,970.00
2.	. The source of the compensation paid to me was:  ☐ Debtor ☐ Other (specify)		
3.	. The source of compensation to be paid to me is:		
	☑ Debtor  ☐ Other (specify)		
4.	I have not agreed to share the above-disclosed compensation with a associates of my law firm.	any other person unle	ss they are members and
	☐ I have agreed to share the above-disclosed compensation with anotassociates of my law firm. A copy of the agreement, together with a compensation, is attached.		
5.	. In return for the above-disclosed fee, I have agreed to render legal servi	ce for all aspects of th	e bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the bankruptcy;	e debtor in determinin	g whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affairs	and plan which may b	pe required;
	c. Representation of the debtor at the meeting of creditors and confirma	tion hearing, and any	adjourned hearings thereof;

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

01/06/2016 /s/ Robert J. Adams & Associates

Date

Robert J. Adams & Associates
Robert J Adams & Associates
901 W Jackson Suite 202

Chicago, IL 60607 Phone: (312) 346-0100 / Fax: (312) 346-6228

Bar No. 0013056

/s/ Alberto Rios

Alberto Rios